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CONFIRMATION NO. 9608

Bib Data Sheet

SERIAL NUMBER 08/936,304	FILING OR 371(c) DATE 09/24/1997 RULE 1.60	CLASS 372	GROUP ART UNIT 2828	ATTORNEY DOCKET NO. 15758.705
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CON of 08/806,102 02/25/1997 PAT 5,754,582 which is a CON of 08/503,987 07/19/1995 ABN which is a CIP of 08/415,960 04/03/1995 ABN

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\***  
 \*\* 02/05/1998

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 20	TOTAL CLAIMS 1	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

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**TITLE**

LASER LEVEL

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